PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

5 Applicant(s): Jen-Chau Wu et al.

Serial No.: 10/791,709 Filing Date: 03/04/2004

Examiner: PHAM, LONG Art Unit: 2814

Docket No.: UECP0012USA

10 Title: ESD PROTECTION CONFIGURATION AND METHOD FOR LIGHT

EMITTING DIODES

To: Mail Stop 16

Commissioner for Patents

15 P.O. Box 1450

Alexandria VA 22313-1450

Subject: Status Inquiry of the Request for Refund filed on September 22, 2006

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Dear Sir,

A request to refund the erroneous deduction of US\$230 on 04/18/2006 was submitted on 09/22/2006 and an official receipt was issued from the USPTO on 10/04/2006 (Attachment 1). However, the amount of US\$230 has not been refunded to the undersigned agent's Deposit Account No. 50-3105 so far.

The subject application was filed on 03/04/2004 with total $\underline{23}$ claims and $\underline{4}$ 30 independent claims, and the excess claim fees were paid by the former agent.

The application was later transferred to the undersigned agent's office. A

response to the Restriction Requirement was filed on 08/11/2005, and the number of claims was unchanged (total 23 claims and 4 independent claims).

An amendment was filed on 12/22/2005 with total <u>22</u> claims and <u>5</u> independent claims and the excess independent claim fee US\$200 was deducted from the Deposit Account No. 503105 on 12/27/2005.

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Another amendment was filed 01/23/2006 with total <u>22</u> claims and <u>5</u> independent claims. No excess claim fee was required for this amendment, and the application was allowed on 04/06/2006. However, it was found that the USPTO erroneously deducted the extra claim fee US\$230 on 04/18/2006

04/18 23	10791709	3232-10	1201	\$80.00	\$35,922.00
04/18 25	10791709	3232-10	1202	\$150.00	\$35,772.00

A table of the correct claim numbers for each amendment and the relevant fee worksheets (Attachment 2) are provided for your reference.

Data	New Filing	Amendment	Amendment	Amendment		
Date	03/04/2004	08/11/2005	12/22/2005	01/23/2006		
Total claims	23	23	22	22		
Independent claims	4	4	5	5		

In conclusion, the deduction of the extra claim fee US\$230 on 04/18/2006 is an office mistake and should be refunded to the Deposit Account No. 50-3105 pursuant to 37 CFR 1.26. Your response in this matter will be greatly appreciated.

Difficulty yours	Sincere	ly	you	rs.
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/Winston Hsu/ Date:	07/21/2010	
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Winston Hsu, Patent Agent No. 41,526

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Note: Please leave a message in my voice mail if you need to talk to me. (The time in D.C. is 12 hours behind the Taiwan time, i.e. 9 AM in D.C. = 9 PM in Taiwan.)



UNITED STATES PATENT AND TRADEMARK OFFICE

Under Secretary of Commerce for Intellectual Property and Director of the United States Patent and Trademark Office

October 4, 2006

NORTH AMERICA INTELLECTUAL PROPERTY CORPORATION P.O. BOX 506 MERRIFIELD, VA 22116 US

Dear Sir/Madam,

This is to acknowledge receipt of your refund request for 10791709 in the amount of \$230.00.

Your request has been forwarded to the Technical Center Others for review and processing.

To inquire about the status of your refund request, please call 703 308-9010 x177.

Thank you,

Technical Center Others

Attachment 2 (4 pages) Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE SMALL ENTITY TOTAL CLAIMS RATE FEE RATE FEE FOR NUMBER FILED BASIC FEE NUMBER EXTRA 385.00 BASIC FEE 770.00 OR TOTAL CHARGEABLE CLAIMS minus 20≈ X\$ 9≈ X\$18= 100 OR INDEPENDENT CLAIMS minus 3 = X43= X86= OR MULTIPLE DEPENDENT CLAIM PRESENT +145= +290= OR * If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL OR TOTAL **CLAIMS AS AMENDED - PART II** OTHER THAN SMALL ENTITY SMALL ENTITY (Column 1) OR (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT AMENDMENT RATE TIONAL RATE TIONAL **AFTER** PREVIOUSLY **EXTRA AMENDMENT** PAID FOR FEE FEE Total Minus X\$ 9= X\$18≈ OR Independent Minus X43= X86= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145= +290≈ OR TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-8 REMAINING ADDI-NUMBER PRESENT AMENDMENT PREVIOUSLY RATE TIONAL AFTER RATE TIONAL **EXTRA** AMENDMENT PAID FOR FEE FEE . Total Minus X\$ 9≈ X\$18≈ OR Independent Minus X43= X86= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145= OR +290= TOTAL OR ADDIT, FEE ADDIT, FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT **PREVIOUSLY** AFTER . RATE TIONAL RATE TIONAL EXTRA **AMENDMENT** PAID FOR FEE FEE Total Minus X\$ 9= X\$18= OR Independent Minus *** X43= X86≈ O'R FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145= +290= OR If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

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OR

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OR

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PTO/SB/06 (12-04)

Approved for use through 7/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of Information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 10 791709 APPLICATION AS FILED - PART I OTHER THAN (Column 1) OR . (Column 2) SMALL ENTITY SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA RATE (\$) FEE (\$) RATE (\$) FEE (\$) **BASIC FEE** (37 CFR 1.16(a), (b), or (c)) SEARCH FEE (37 CFR 1.16(k), (l), or (m)) **EXAMINATION FEE** (37 CFR 1.16(a), (p), or (q)) **TOTAL CLAIMS** (37 CFR 1.16(I)) .minus 20 = OR INDEPENDENT GLAIMS (37 CFR 1.16(h)) minus 3 = If the specification and drawings exceed 100 sheets of paper, the application size fee due **APPLICATION SIZE** is \$250 (\$125 for small entity) for each (37 CFR 1.16(s)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(J)) If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II OTHER THAN OR (Column 1) (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST 8-11-05 REMAINING PRESENT NUMBER RATE (\$) ADDI-RATE (\$) ADDI-AFTER PREVIOUSLY **EXTRA** TIONAL ENDMENT TIONAL AMENDMENT PAID FOR FEE (\$) FEE (\$) Total Minus 23 (37 CFR 1.16(1)) × 25 OR Independent (37 CFR 1.16(h)) Minus = x260 OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(J)) 36 O 180 OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER PRESENT RATE (\$) ADDI-RATE (\$) ADDI-AFTER **PREVIOUSLY EXTRA** ENT TIONAL TIONAL AMENDMENT PAID FOR FEE (\$) FEE (\$) Total (37 CFR 1.16(i)) Minus ENDM ×25 OR Independent (37 CFR 1.16(h)) Minus 200 = ×.100 = OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)). 360 180 OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the entry in column 1 is less than the entry in column 2, write 0 in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number 10/79/709 Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) FOR NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE BASIC FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = X S OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 = X S = X \$ OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) = OR * If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 1) (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-PREVIOUSLY ENT AFTER AMENDMENT **EXTRA** TIONAL TIONAL PAID FOR FEE FEE Total (37 CFR 1.16(c)) Minus ENDM x s 25 = x \$ 50 OR Minus x <u>s_</u>200 = 200 4 x \$ 100= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) + s<u>180</u> = + <u>\$ 360</u>= OR TOTAL ADD'L FEE 200 OR ADDITE (Column 1) (Column 2) (Column 3) CLAIMS **HIGHEST** ω PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-AFTER AMENDMENT **EXTRA PREVIOUSLY** TIONAL TIONAL PAID FOR FEE FEE ũ Total (37 CFR 1.16(c)) Minus ENDM × ۶<u>۵5</u> = x s <u>50</u> = OR Minus x s /00 = x s 200 = OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) + 360 = + s 180 = OR TOTAL TOTAL ADD'L FEE ADD'L FEE OR (Column 3) (Column 1) (Column 2) CLAIMS HIGHEST PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-ENDMENT **AFTER PREVIOUSLY EXTRA** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total (37 CFR 1.16(c)) Minus x \$25 = x s<u> 50</u> = OR Minus x \$ 200= x \$ 100 = OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) +\$180= + \$360 = OR TOTAL ADD'L FEE TOTAL OR ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

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PTO/SB/06 (08-03)
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PATENT APPLICATION FEE DETERMINATION Substitute for Form PTO-875								RECORD		Application or Docket Number		
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR NUMBER FILED NUMBER EXTR				MBER EXTRA		RATE	FEE		RATE	FEE		
BASIC FEE (37 CFR 1.16(a))							7		3	OR		3
TOTAL CLAIMS (37 CFR 1.18(c)) mtnus 20 =							1	X \$=		OR	x s=	
INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 ° '						1	x s=		OR	X \$ =		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(d))							1	+ 5=		OR	+: -	<u> </u>
* If the difference in column 1 is less than zero, enter "O" in column 2.						,	TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II												
[2:22:05 (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR		R THAN ENTITY
NT A		RE	LAIMS MAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSL PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
M	Total (37 CFR 1.18(e))		22	Minus	23	•		x s <u>25</u> =		OR	x \$ <u>50</u> =	
AMENDMENT	Independent (37 CFR 1,18(b))		5	Minus	" 4	- 1		x <u>s 100</u> =		OR	x 3 <u>200</u> =	200
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))							+ 180 =		OR	+5360=		
1_72_1							TOTAL ADD'L FEE		OR	ADTE E	200	
\perp	W 7 12		umn 1)		(Column 2) (Column 3)				, ,		
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AMENDMENT	Independent (37 CFR 1.16(b))	ĽŠ		Minus	S	=		x 100 =		OR	x : <u>400</u> =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))								+= 180 =		OR	+ =360 =	
								ADD'L FEE		OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)											-	
ENTC		REM	AIMS IAINING FTER NDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR			RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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AMENDMENT	Independent (37 CFR 1.16(b))	•		Minus	•••	=		x \$ <u>100</u> =		OR	x s_000=	
¥	FIRST PRESENT.	ATION C	F MULTIPLE	DEPENDE	NT CLAIM (37	CFR 1.16(d)		+:180=		OR	+ :360 :	
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". ** If the "Highest Number Previously Paid For" IN THIS SPACE Is less than 3, enter "3". The "Highest Number Previously Paid For" IN THIS SPACE Is less than 3, enter "3".												

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